

Medí-Cal Health Care Program Update

"To Enrich Lives Through Effective and Caring Service"

APRIL 2008

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Missed any issues of the Medi-Cal Health Care Program Updates?

Log on to the DPSS website www.ladpss.org. Once there, click on the "Health Care" link on the left hand side; then look for the "Medi-Cal Monthly Updates" link to get past and current issues of the newsletter.

You will also find the Index and Table of Contents which make it easy to find articles published in past issues of the newsletter.

ASSISTED LIVING WAIVER PILOT PROJECT (ALWPP)



The Assisted Living Waiver Pilot Project (ALWPP) was created to test the efficacy of assisted living as a Medi-Cal benefit and as an alternative to long-term care skilled nursing facility placement. Los Angeles, Sacramento and San Joaquin counties have been selected to test the ALWPP in two settings: licensed residential care facilities for the elderly and in publicly funded senior and/or disabled housing.

Those willing to enroll in the ALWPP must be referred to a care coordinator agency (CCA) which, on behalf of DHCS, will assess the level of nursing care that the applicant needs. When CCA determines that the applicant meets the level of care criteria, the referral is sent to the district office. Medi-Cal benefits are evaluated/re-evaluated giving the appropriate board and care income deduction and other applicable deductions.

Individuals residing in licensed board and care facilities receive the standard \$315 income deduction, or the excess board and care deduction, whichever is greater. The excess board and care is calculated by subtracting the \$600 maintenance need from the total amount paid for board and care.

Example 1. The person pays \$1,300 for board and care, the excess board and care deduction is \$700 (\$1,300 - 600 = \$700). When evaluating/re-evaluating Medi-Cal benefits, staff must allow the \$700 excess board and care deduction since \$700 is greater than the standard \$315 income deduction.

Example 2. The person pays \$750 for board and care, the excess board and care deduction is \$150 (\$750 - 600 = \$150). When evaluating/re-evaluating Medi-Cal benefits, staff must allow the standard \$315 income deduction since \$315 is greater than the \$150 excess board and care deduction.

ALWPP applicants are treated as if they were institutionalized; therefore, spousal impoverishment rules used only in Long Term Care (LTC) cases apply in the treatment of income and/or property.

The State has not yet released policies and procedures for ALWPP. In the meantime, staff must perform the Medi-Cal evaluation/re-evaluation when the ALWPP referral is received and inform the referring party of the outcome. Please contact Medi-Cal Program Section if you have questions concerning the ALWPP referrals.

Source: MEPM Article 10Q & ACWDL Draft- ALWPP Procedures.



CHILD/MEDICAL SUPPORT REFERRALS

This is to remind Medi-Cal staff that Child/Medical Support referral packets submitted to Child Support Services by mail are to be mailed to:

Child Support Services 5701 South Eastern Avenue Commerce, CA 90040 Attn: Central Intake Unit



Treatment of Income Tax Refunds

When participants report receiving checks in the form of an Income Tax Refund, it is important to know how to treat them. The income from Tax Refund is to be considered EXEMPT as "Income" in the month it is received and is also EXEMPT as "Property" in the following two months after it is received; for a total of three months.

After the three months, any remaining balance is to be considered a resource.

2008 MEDI-CAL INCOME LEVEL CHARTS

	1931(b)		TMC	Reg-M/C	Expande	Expanded Children's Percentage		HF & Medicare Savings Pro			rograms	A&D	PICKLE	
Family Size	MBSAC (12/04)	100% (4/08)	185% (2 nd 6 Mos) (4/08)	Maintenance Need Levels (MMNL)	100% (Age 6-19) (4/08)	133% (Age 1-6) (4/08)	200% (Pregnant & child to 1 Yr)(4/08)	250% (4/08)	100% QMB (3/08)	120% SLMB (3/08)	135% QI-1 (3/08)	100% (4/08)	Last SSI/SSP Check Received Between Multiplier	
1	\$398	\$867	\$1,604	\$600	\$867	\$1,153	\$1,734	\$2,167	\$867	\$1,040	\$1,170	\$867	1/07-12/070.0225 01/06-12/060.0537 01/05-12/050.0910	
2	\$653	\$1,167	\$2,159	*\$750	\$1,167	\$1,552	\$2,334	\$2,917	\$1,167	\$1,400	\$1,575	\$1,167	01/03-12/030.0910 01/04-12/040.1149 01/03-12/03 0.1331	
3	\$808	\$1,467	\$2,714	\$934	\$1,467	\$1,951	\$2,934	\$3,667	\$1,467	\$1,760	\$1,980	\$1,467	01/02-12/02 0.1451 01/01-12/01 0.1667	
4	\$961	\$1,767	\$3,269	\$1,100	\$1,767	\$2,350	\$3,534	\$4,417	\$1,767	\$2,120	\$2,385	\$1,767	01/00-12/00 0.1949 01/99-12/99 0.2138 01/98-12/98 0.2239 01/97-12/97 0.2398 01/96-12/96 0.2612	
5	\$1,094	\$2,067	\$3,824	\$1,259	\$2,067	\$2,749	\$4,134	\$5,167	\$2,067	\$2,480	\$2,790	\$2,067		
6	\$1,229	\$2,367	\$4,379	\$1,417	\$2,367	\$3,148	\$4,734	\$5,917	\$2,367	\$2,840	\$3,195	\$2,367	01/95-12/95 0.2800 01/94-12/94 0.2996 01/93-12/93 0.3173	
7	\$1,350	\$2,667	\$4,934	\$1,550	\$2,667	\$3,547	\$5,334	\$6,667	\$2,667	\$3,200	\$3,600	\$2,667	01/92-12/92	
8	\$1,473	\$2,967	\$5,489	\$1,692	\$2,967	\$3,946	\$5,934	\$7,417	\$2,967	\$3,560	\$4,005	\$2,967	01/90-12/90 0.3936 01/89-12/89 0.4208	
9	\$1,591	\$3,267	\$6,044	\$1,825	\$3,267	\$4,345	\$6,534	\$8,167	\$3,267	\$3,920	\$4,410	\$3,267	01/88-12/88 0.4431 01/87-12/87 0.4655 01/86-12/86 0.4724	
10	\$1,709	\$3,567	\$6,599	\$1,959	\$3,567	\$4,744	\$7,134	\$8,917	\$3,567	\$4,280	\$4,815	\$3,567	01/85-12/85	
Each Added Person	\$-0-	\$300	\$555	* 2 Adults \$934 \$14	\$300	\$399	\$600	\$750	\$300	\$360	\$405	\$300	07/82-12/83 0.5223 07/81-06/82 0.5552 07/80-06/81 0.6000 07/79-06/80 0.6501 07/78-06/79 0.6816 07/77-06/78 0.7010 04/77-06/77 0.7177	
		IVING AR	STANDARDS RANGEMENT	PRE Part B \$9	2008 MEDICARE PREMIUM Part B \$96.40		SGA DISABLED (01/08) \$940		AVERAGE PRIVATE PAY (To determine Period of Ineligibility) 1999 \$3,882 2000 \$3,836)	2008 SSA COLA Multiplier 1.023		
Aged/Dis Blind Disabled		Jan-Sep 08 Oct-Dec 08 \$870 \$888 \$935 \$955 \$756 \$769 COUPLE		2008 TB	2008 TB INCOME STANDARD \$1,359		A&D FPL DEDUCTIONS Individual \$230 Spouse Couple 01/01/08-03/31/08 \$383 04/01/08-09/30/08 \$357 10/01/08-12/31/08 \$391		\$3,836 \$4,163 \$4,322 \$4,415 \$4,477 \$4,812 \$5,031 \$5,101 \$5,496		Indivi	2008 FEDERAL BENEFIT RATE (FBR) Individual (ABD) \$637 Couple (ABD) \$956		
Both Aged/Dis Both Blir	nd	<u>Jan-Sep 08</u> <u>Oct-Dec 08</u> \$1,524		3							CSR.	2008 LONG TERM CARE BUDGET FAC CSRA Limit S Community Spouse Maintenance Need S Dependent Relative Allowance (1/01/08-06/30/08) S Home Maintenance Allowance Shared Home Maintenance Allowance Maintenance Need		
One Blin other Ag Disabled	ed or	\$1,660	6 \$1,705	5	(All Pr Weekly		/ERSION FACTOR rograms) X 4.33 ry 2 weeks) X 2.167		2008 QMB/SLMB/QI-1 SSI Standard Allocation \$319 "Any Income" Deduction \$20					